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CONFIRMATION NO. 1652

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/524,821		514	1617	26581U

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/EP03/09622 08/29/2003

**** FOREIGN APPLICATIONS *******

EUROPEAN PATENT OFFICE (EPO) 02019406.4 08/30/2002

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and Acknowledged	/SAMIRA JM JEAN-LOUIS/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	GERMANY	0	19
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TITLE

Use of the combination of ciclesonide and antihistamines for the treatment of allergic rhinitis

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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